



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov

## BIB DATA SHEET

CONFIRMATION NO. 6917

| SERIAL NUMBER   | FILING or 371(c)<br>DATE  | CLASS  | GROUP ART UNIT  | ATTORNEY DOCKET<br>NO.      |                           |                                |
|---|---|--|---|-----------------------------|---------------------------|--------------------------------|
| 10/580,081  | 02/14/2007  | 435  | 1651  | 57301-002US1                |                           |                                |
| <b>APPLICANTS</b><br>Gavin Vinson, London, UNITED KINGDOM;<br><b>** CONTINUING DATA *****</b><br>This application is a 371 of PCT/GB04/04912 11/22/2004<br><b>** FOREIGN APPLICATIONS *****</b><br>UNITED KINGDOM 0327046.9 11/20/2003<br><b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** ** SMALL ENTITY **</b><br>08/21/2007 |   |  |   |                             |                           |                                |
| Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br>35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br>Verified and Acknowledged <u>/RUTH A DAVIS/</u><br>Examiner's Signature   |   | <input type="checkbox"/> Met after Allowance<br><u>rad</u><br>Initials | <b>STATE OR COUNTRY</b><br>UNITED KINGDOM   | <b>SHEETS DRAWINGS</b><br>6 | <b>TOTAL CLAIMS</b><br>16 | <b>INDEPENDENT CLAIMS</b><br>5 |
| <b>ADDRESS</b><br>OCCHIUTI ROHLICEK & TSAO, LLP<br>10 FAWCETT STREET<br>CAMBRIDGE, MA 02138<br>UNITED STATES  |   |  |   |                             |                           |                                |
| <b>TITLE</b><br>Regulation of Sperm Function  |   |  |   |                             |                           |                                |
| <b>FILING FEE RECEIVED</b><br>715   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |  | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees (Filing)<br><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)<br><input type="checkbox"/> 1.18 Fees (Issue)<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |                             |                           |                                |